

FD600000000016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100061934931

12/08/05--01031--013 **87.50

FILED

2006 JAN -3 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FD6-12
ae

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Calibre Partners, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Robert D. Wilcox

(Name of Person)

Wilcox Law Firm

(Firm/Company)

6817 Southpoint Parkway, Suite 1302

(Address)

Jacksonville, FL 32216

(City/State and Zip code)

For further information concerning this matter, please call:

Robert Wilcox

(Name of Person)

at (904) 281-0700

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

2006 JAN -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Calibre Partners, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 55-0906158

(FEI number, if applicable)

4. 10/05/2005

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8135 Mar Del Plata Street East Jacksonville, Florida 32256

(Principal office address)

(Current mailing address)

8. All legal purposes of a for-profit corporation

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Robert D. Wilcox

Office Address: 6817 Southpoint Parkway, Suite 1302

Jacksonville

(City)

, Florida 32216

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Robert Wilcox Robert Wilcox

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

2006 JAN -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

A. DIRECTORS

Chairman: Stanley Rozycki
Address: 8135 Mar Del Plata Street East
Jacksonville, Florida 32256
Vice Chairman: Mark Helms
Address: 105 Hoyt Street, Apartment 2
Brooklyn, New York 11217
Director: James Cappel
Address: 24346 S. Dupage Drive
Channahon, IL 60410
Director: Chris Rozycki
Address: 8135 Mar Del Plata Street East
Jacksonville, Florida 32256

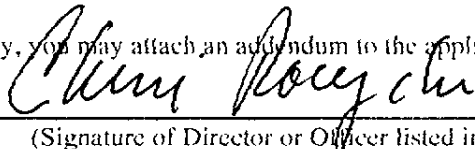
B. OFFICERS

President: Chris Rozycki
Address: 8135 Mar Del Plata Street East
Jacksonville, Florida 32256
Vice President: Mark Helms
Address: 105 Hoyt Street, Apartment 2
Brooklyn, New York 11217
Secretary: James Cappel
Address: 24346 S. Dupage Drive, Channahon, IL 60410
Treasurer: James Cappel
Address: 24346 S. Dupage Drive, Channahon, IL 60410

2006 JAN -3 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)
14. Chris Rozycki, President
(Typed or printed name and capacity of person signing application)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2005

ROBERT WILCOX
6817 SOUTHPOINT PARKWAY, SUITE 1302
JACKSONVILLE, FL 32216

SUBJECT: CALIBRE PARTNERS, INC.
Ref. Number: W05000054824

We have received your document for CALIBRE PARTNERS, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

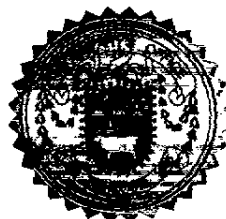
Letter Number: 305A00071695

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CALIBRE PARTNERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2005.



4041150 8300

051071228

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4411550

DATE: 12-29-05